ALiS

Centralized Licensing, Inspections and Complaints System (CLICS)

Temporary Events: Consumer Application Instructions

IMPORANT NOTICE:

APPLICATIONS MUST BE RECEIVED NO LATER THAN 5 BUSINESS DAYS BEFORE THE EVENT

To begin the licensing process, go to <u>https://nvdpbh.aithent.com/login.aspx</u> and then click on the Environmental Health tab. Click on the link "Click Here" under "Apply for a Temporary Food Permit"

USER LOGIN	HCQC Child Care Environmental Health
Login Name Password	Welcome to the online Permits and Renewals system for the Environmental Health Section:
Forgot Login/Password Login	Return Users: Type in your user name, password and then click on the LOGIN box. New Users: Click on "create a new account" and follow the on-screen directions.
Password is case sensitive.	Select the <u>Common Business Application</u> on the left hand side to apply for the following annual license types:
Already Licensed by NV DPBH: Register Here	 Food Establishment Food Establishment Exemption Cottage Food Registration Farm to Fork Registration Shellfish Distributor Certificates of Free Sale Public Bathing Places Public Accomodations Drug/Cosmetic Manufacturer Camping and Recreational Vehicle Park Institutions Sewage Programs
To apply for a Common Business Applie View Gree Here To apply for Temporary Food Permit:	Select Temporary Food Establishment for special event permits.
To Search in an Englishmental Health Facility Licensee: Click Here	Email questions to <u>EHScustomerservice@health.nv.gov</u> Call us at (775) 687-7533 For a list of contacts son our the Environmental Health Section Web Pages at
	We accept: WSA echeco blocker

New Applicants

For those who have never used this system it will direct you to set up a Login Name and Password. PLEASE KEEP THIS INFORMATION ON HAND. If you apply for future application you will be signing into the same account to apply for multiple Temporary Event Permits.

Returning Applicants

For those who have already built a profile, when applying for a Temporary Event Permit in the past, use the top box "USER LOGIN" to return to your home site to "apply for a new License," under the: What do you want to do now" section.

Initial Registration Page:

Facility Information		_	_		
Nevada Business ID is issu registration process Click	ied by Secretary of State (SoS) t Here	hrough common busines:	registration process usi	ng SilverFlume To find more det	ails about common business
Facility Name (DBA Name)) *		N	V Business ID	
Mailing Address					
Country *	United States				
Address *				Apt/Unit/etc.	
City *	St	tate/Province *	Nevada 🗸	County *	Choose One 💙
Zip *	Pr	rimary Phone # - Ext *		Alternate Phone # - Ext.	
Fax	Pr	rimary-Email *		Alternate E-mail	
Online Account Inform	nation	_	_	_	
Login Name *					
Password *	Passwor	d is case sensitive and m	ust be at least 8 letters lo	ong with at least one upper case	e letter and one number
Re-type Password *	and one	special character.			
Reset		Regis	ter		Back

You will need to fill out the following:

- Facility Name (DBA): this should be the registered name of your business.
- **NV Business ID:** if you have a state business ID, enter it here. It would be "NV" followed by 11 numbers.
- Mailing Address Section:
 - o Address is the street address where you receive correspondence for your business
 - City/State/County/Zip: enter the appropriate values that go with the address
 - Phone/Email: this should be the contact information to receive correspondence for your business
- Account Information (Login):
 - The Login Name can be anything using A-Z and 0-9. Take note of it before submitting the form so you don't forget.
 - Password: must conform to the text in red, for example "MyBusiness.6" contains all the elements needed. Make the password something you can remember, but not easy to guess.
- When you are done with the form, click the **Register** button.

Application Type: Temporary Events

Select the type of application you would like to apply for then in the area that appears below click the checkbox for the license. Select the highest risk category that is possible based on the type of food you will be selling. Information about the risk categories:

- Category 1-Low Risk = packaged foods only (will not be opened, such as a bag of chips).
- Category 2-Moderate Risk (non-PHF's) = non-Potentially Hazardous Foods, such as beer or alcohol without ice, chips with canned nacho cheese sauce, samples of jams and jellies, samples of dried nuts.
- Category 3-Moderate Risk (PHF's) = Food cooked from a raw state, such as Hamburgers, Sausages, and chicken; items that require Temperature Control for Safety (TCS) such as refrigeration (or ice) or items that must remain hot.
- Category 4-High Risk = food that are commonly associated with foodborne illnesses and/or involve special processing, THESE ARE NOT COMMONLY ALLOWED AT TEMPORARY EVENTS!

IMPORTANT: If you are registering a Temporary Mass Gathering, please contact us at (775) 687-7533 and see the guide for Temporary Mas Gathering.

When you are finished click the **Next** button.

Preliminary Step Fields marked with asterisk (*) are required. Application Type * Which application would you like to apply? Temporary Event - Burning Man O Temporary Mass Gatherings Femporary Event - Local Events Credential CATEGORY 1 - LOW RISK CATEGORY 2 - MODERATE RISK TEMPORARY FOOD ESTABLISHMENT - LOCAL EVENTS (NON-PHF'S) Endorsement INFORMATION CATEGORY 3 - MODERATE CATEGORY 4 - HIGH RISK RISK (PHF'S) N/A Endorsement TEMPORARY EVENT COORDINATOR INFORMATION PROVIDING DOCUMENTATION PROVIDING THAT THE EVENT DOCUMENTATION THAT COORDINATOR HAS LEASED THE FOOD ESTABLISHMENT THE LOCATION AND THAT THE DOES NOT REQUIRE A EVENT COORDINATOR IS A PERMIT AS PER NEVADA TEMPORARY FOOD - LOCAL EVENT EXEMPTION NON PROFIT ORGANIZATION STATE LAW Endorsement INFORMATION PROVIDING DOCUMENTATION THAT THE EVENT IS A COOK-OFF OR JUDGED EVENT AND THAT FOOD WILL NOT BE SERVED TO THE GENERAL PUBLIC.





Edited: 6/01/2017

Entity Information:

- Business Entity Information

- Facility Name (DBA): This will be automatically filled in from your registration, however if you mistyped you may correct it here
- **NV Business ID:** This will be automatically filled in from your registration but cannot be changed here
- **Registered Name/Legal Business Name**: this should be the exact name on your state business license, if applicable. It may be different from your DBA name.
- **Ownership Type:** Select from this list. LLC, Corporation, etc. depending on the business type.
- **Primary Contact Information:** The contact information including name, phone, and email should be for the person that will receive correspondence on licensing issues for the business. Their role may be owner, manager, etc.
- **Event Date and Time:** Click the "Add" link to add new lines for each day from the beginning to the end of the event. On each line, select the date, select the hours you will be open, and change "Serving Food" setting depending on whether you are serving food or not.
- When you are finished filling out the form, click the **Next** button.

Please review Information for accuracy.				«Back	Next»
Business Entity Information					
Nevada Business ID is issued by Secretary of State registration process Click Here Facility Name (DBA Name) * Registered Name with Secretary of State (Legal/Bu Primary Contact First Name * Primary Contact Last Name * Primary Contact Email * Event Date and Time Please click 'Add' to add a new row.	(SoS) through com	Temporary Inc Temporary Inc Temporary Inc Steven Segal bestburningman@thebu	ocess using SilverFlume To find more de NV Business ID Ownership Type * Primary Contact Middle Name Primary Contact Role * Primary Contact Phone *	Corporation Owner 111-111-1111 Add	Delete
Enter the date and time when food service begins a	and ends for each d	ay.			
Event Date * Event Hours 10/26/2015 Image: Open 24 Hours 10/27/2015 Image: Open 24 Hours 10/28/2015 Image: Open 24 Hours	Fr V V	rom	То	Serving Food Yes V Yes V Yes V	
				«Back	Next»

Address Information:

Most of the information in the mailing address section should appear based on what you have entered previously. The mailing address is where correspondence will be sent. When you have entered these click the **Next** button.

Please review Address	Information for accuracy.				«Back	Next»
Mailing Address	_	_	_	_	_	
Country *	United States					_
Address *	123 temporay lane			Apt/Unit/etc.		
City *	carson city	State/Province *	Nevada 🗸	County *	Carson City	~
Zip *	12345	Primary Phone # - Ext *	111-111-1111	Alternate Phone # - Ext.		
Fax		Primary-Email *	TemporaryEventPlanner	Alternate E-mail		
					«Back	Next»
	. –					

Edited: 6/01/2017

Additional Information:

The Additional Information section will be shown. For a temporary event it will display like this:

Temporary Event - Local Events		
Fields marke	d with asterisk (*)	are required
Requested Credential(s) : TEMPORARY FOOD ESTABLISHMENT - LOCAL EVENTS(CATEGORY 3 - MODERATE RIS	K (PHF'S))	
	< Back	Next >>
Event Information		
Establishment Name *		
Responsible Entity Name *		
Event Name * Coordinator Name		
Event Location *		
Is this Temporary Food Establishment operated by a Religious, Charitable, or Other Non-Profit Organization? * OYes ONO		
Open Date Elose Date		
Which county will this event take place in? * Choose One 🔽		
Reset	<< Back	Next >>

This information is extremely important for accurate records. It has a section for each license with the same fields:

The accuracy of this section will determine the fees charged at the end of the on-line application process.

- **Establishment Name**: This is the specific name of the booth or company (usually DBA name) for each license. They may be the same or different depending on how the business is structured.
 - Example: The Red Porch Fine Dining
 - Example: Red's Bar
- **Responsible Person:** This should be the person-in-charge or owner of the booth establishment that will be present during an inspection or complaint, and present during the event.
- For Temporary Event Permits:
 - **Event Name:** enter the name of the event you will be participating in.
 - Coordinator Name: Enter the name of the main event coordinator.
 - Event Location: enter the address where the event will be held.
 - Religious, Charitable, or Non-Profit: Select whether the event falls into one of these categories.
- For Burning Man Permits:
 - Camp Name: The name of the camp your establishment will be associated with.
 - Registered with Theme Camp: Select if you are registered or not with a theme camp
 - o Theme Camp Location: If affiliated with a theme camp, list the location of the camp
- **Open Date and Close Date:** Enter the open and close date for the event.
- County: Select the County that the business is located in. Do not select "All" unless instructed by staff.

This page contains fields that are used by other programs. You may leave them blank if they are not applicable to the facility type.

When you are finished entering all the information for all licenses, click the **Next** button. Edited: 6/01/2017

Questions:

This page displays a list of questions that must be answered regarding your facility. A hidden box may pop up requesting more information depending on your answers. When you are finished select the **Next** button.

			<< Back Nev
et	tions		< Dack Nex
.51		_	
0	Question	Respon	se
	Are you or anyone listed in the application now licensed or have been previously licensed for the similar business? If yes, please list the state Agency, type of license and license number.	Oyes	() No
	Have you ever applied for a Temporary Event Permit? If so under what facility name, what event and what was the last event date.	○Yes	○ No
	Are food or drinks to be served at this event? If yes, please list all food and drinks below. If needed, attach full list to the end of this application.	⊖Yes	() No
	Are you transporting foods to the event? If yes, state how these foods will transported.	⊖Yes	() No
	You must purchase all foods or ingredients from a permitted retail or wholesale food establishment. List each grocery store, club store or other location where you will be purchasing food. If more space is needed, attach a full list at the end of this application.		
	Are you holding food cold? If yes, state how food will be maintained at 41 degrees Fahrenheit or less. List the equipment to be used.	○Yes	○ No
	Are you cooking foods at the event? If yes, state at what temperatures food will be cooked. List the cooking equipment to be used.	⊖Yes	
	Are you cooking eggs? If yes, what temperature will you cook eggs to? degrees F	⊖Yes	0 No
	Are you cooking fish? If yes, what temperature will you cook fish to? degrees F	⊖Yes	
	Ae you cooking beef? If yes, what temperature will you cook beef to? degrees F	⊖Yes	
	Are you cooking poultry? If yes, what temperature will you cook poultry to? degrees F	⊖Yes	
	Are you reheating food? If yes, what temperature will you reheat food to? degrees F	Oyes	O No
	Are you cooling any cooked food for later service? If yes, how do you intend to cool the food? Note that you must receive advance approval to cool foods, and must strictly comply with instructions on cooling from DPBH-EHS.	OYes	0 No
	Are you holding food hot? If yes, state how food will be maintained at 135 degrees Fahreinheit or above. List equipment to be used.	Oyes	() No
	Are you preparing any food off-site? If yes, state where the food will be prepared.	⊖Yes	○ No
	Is this off-site location a pemitted food establishment? If yes, tell us what food establishment. Please state the name of the establishment and provide the permit number. If the establishment does not hold a permit with the State of Nevada Division of Public & Behavioral Health, please attach a copy of the current permit and most recent inspection report at the end of this application.) Yes	O Onot No Applicable
	Will the booth have a dedicated hand washing set up? If yes, describe the hand washing set up.	() Yes	

Attestation and Electronic Signature:

Read the legal statements and agree by checking the box to the left. Enter your full name (this is your digital signature) and the current date. When you are done, select "**Submit Application**".

Temporary Event - Local Events
Fields marked with asterisk (*) are required.
Requested Credential(s) : TEMPORARY FOOD ESTABLISHMENT - LOCAL EVENTS(CATEGORY 3 - MODERATE RISK (PHF'S))
Entity Information Address Information Additional Information Questions Attestation
<< Back
Attestation
 You must check the following: The act of affixing and executing the following signature is made with the present intent to identify myself as the authorized person signing this document and with the present intent to authenticate my signature as such. I am declaring, under penalty of perjury, that the information I am about to submit to the Nevada Division of Public and Behavioral Health is true and correct, is not submitted for any improper purpose, and that I am authorized to submit the information. I understand it is unlawful to submit any illegal, unauthorized, fraudulent, deceitful, forged, deceptive, defamatory, illicit, or improper information, as defined by state and federal law, to the Nevada Division of Public and Behavioral Health, and any other parties entitled thereto, for any damages incurred for any unlawful, unauthorized, fraudulent, deceitful, forged, deceptive, defamatory, illicit, or improper information, as defined by the federal and state law, submitted to the Nevada Division of Public and Behavioral Health by my use of this electronic filing system. I further understand that I may be subject to criminal and/or civil penalties for submitting any unlawful unauthorized, fraudulent, deceitful, forged, deceptive, defamatory, illicit, or improper information, as defined by federal and state law. I understand and agree that all information submitted is the property of the Nevada Division of Public and Behavioral Health, and may be monitored for all lawful purposes. I further understand that during such monitoring, all information, including personal information placed on this system, may be examined, copied, and used for any authorized purpose. I understand that I am responsible for any errors or omissions in the input of information and that I am also responsible for reviewing all information for completeness and correctness prior to submission. declare under penalty of perjury th
I hereby attest that the above information is true and correct. I have read, understand and agree to comply with the rules and regulations pertaining the the specific statutory type of entitiv for which this licensure application is made
 Fees paid will not be refunded for failure to obtain approval, voluntary withdrawal or cancellation of the event.
Name * Date * 05/31/2017
Submit Application << Back

Fee Review

On the next page, the license fee preview will be displayed. Click "Pay Now".

Fee Details		
Licensing fee (034-Temporary Food Establishment - Local Events)	\$50.00	
Total Fee	\$50.00	
	Edit Application	Pay Now

Confirmation Page: Application Submitted

The site will guide you to the checklist and you will need to add your applications and other documentation. Note your transaction number in bold. There is also the option to print the application summary for your records. You may now Logout or Return to Home and apply for any additional licenses you may require.

Temporary Event - Local Events Submitted
Confirmation
YOUR APPLICATION IS NOT COMPLETE AND A PERMIT CANNOT BE ISSUED UNTIL THE APPLICATION AND OTHER REQUESTED DOCUMENTS ARE ATTACHED BELOW.
IF THERE IS NO CHECKLIST OR DOCUMENTS ATTACHMENT SECTION HERE YOU ARE NOT REQUIRED TO ATTACH A DOCUMENT. Thank you for using our online services. Your Temporary Event - Local Events has been submitted to Environmental Health Section program of NV DPBH. Your online transaction number is 175221. If we need any additional information; we will contact you.
The payment receipt has been sent to: <u>JROLLER@HEALTH.NV.GOV</u>
If you would like to print your payment receipt: <u>dick here</u>
To view the application summary click here
Checklist
If you have scanned copy of supporting documents, please click on the Documents link to upload.
Return to Home Logout

When all required items are reviewed, your application will be processed. You may receive a call from an EHS staff to conduct a telephone interview. Once approved, a copy of your permit will be e-mailed to you. YOU MUST POST YOUR PERMIT DURING THE EVENT IN A LOCATION THAT IS EASILY VISIBLE TO THE PUBLIC. Confirm with the event coordinator that you have submitted your application and when you have received your permit.

Returning to complete an application:

To return to your account to complete and application or manage your licenses, go to:

https://nvdpbh.aithent.com/login.aspx and then enter your user name and password and then click the Login box:

USER LOGIN
Login Name Password
Forgot Login/Password Login
Password is case sensitive.
Already Licensed by NV DPBH: Register Here

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You will see a menu on the left side:

Contact Information	
Name: Chuck's Steakhouse	
222 steak road Carson City NV 12345	
Phone #: 111-111-1111	
Email: chuck@chuckssteakhou	use123.net
WHAT DO YOU WANT T	O DO?
View Pending Online Applicati	on(s)
Kenew	
Apply for New License	
Statement of Deficiency/OOC	
Pay Invoice(s)	
Remodel	
Change Contact Information	
View Credential(s)	
Change Password	

Click on "View Pending Online Application(s)". You will see a list of applications for review. Select "View Details" for the application you want to look at:

Pending / Incomplete Online Application(s)						
Application Type	Transaction #	Date	Current Step	Application Summary	View Details	Action
Cottage Food Registration	451	10/02/2015	Review by State	Application Summary	View Details	Withdraw
ood Establishment	449	10/01/2015	Review by State	Application Summary	View Details	Withdraw

Or click on "continue Application" to continue where you left off; or "Withdraw" to withdraw the application:

Pending / Incomplete Online Application(s)

Return To Home

Pending / Incomplete Online Application(s)						
Application Type	Transaction #	Date	Current Step	Application Summary	View Details	Action
Temporary Event - Local Events	175221	06/01/2017	Review by State	Application Summary	View Details	Withdraw
Temporary Event - Local Events	175218	05/31/2017	Review by State	Application Summary	View Details	Withdraw
Temporary Event - Local Events	175220					Continue Application Withdraw

If continuing an application, the system takes you back to the "Entity Information" section, but remembers the information entries you have made, with the exception of the attestation page. Just confirm the information and select "NEXT" to proceed forward.

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